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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/708,085	
	Filing Date	November 8, 2000	
	First Named Inventor	Nobuhiro JIWARI et al.	
	Group Art Unit	Unassigned	
	Examiner Name	Unassigned	
Total Number of Pages in This Submission		Attorney Docket Number	0819-0450

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawing(s) (Figs. 1 - 4) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Patent Application Bibliographical Data Sheet <input checked="" type="checkbox"/> English translation of application and Declaration (23 pages) <input checked="" type="checkbox"/> Copy of Notice to File Missing Parts dated 01/17/01
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Eric J. Robinson, Reg. No. 38,285 Nixon Peabody LLP 8180 Greensboro Drive Suite 800 McLean, VA 22012
Signature	
Date	3/15/01

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 3/19/01			
Type or printed name	Aya M. Dixon		
Signature		Date	3/19/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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FEE TRANSMITTAL
FOR FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (S) 1,010.00

Complete if Known

Application Number 09/708,085

Filing Date November 8, 2000

First Named Inventor Nobuhiro JIWARA et al.

Examiner Name Unassigned

Group Art Unit Unassigned

Attorney Docket No. 0819-0450

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 19-2380

Deposit Account Name Nixon Peabody LLP

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit Card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
101	201	710	355	Utility filing fee	710.00
106	206	320	160	Design filing fee	
107	207	490	245	Plant filing fee	
108	208	710	355	Reissue filing fee	
114	214	150	75	Provisional filing fee	

SUBTOTAL (1) (S) 710.00

2. EXTRA CLAIM FEES

Total Claims 9 -20** = 0 X 18 = 0

Independent Claims 2 -3** = 0 X 80 = 0

Multiple Dependent 0 = 0

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
103	203	18	9	Claims in excess of 20	
102	202	80	40	Independent claims in excess of 3	
104	204	270	135	Multiple dependent claim, if not paid	
109	209	80	40	** Reissue independent claims over original patent	
110	210	18	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (S) 0

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
105	205	130	65	Surcharge - late filing fee or oath	130.00
127	227	50	25	Surcharge - late provisional filing fee or cover sheet	
139	239	130	130	Non-English transaction	130.00
147	247	2,520	2,520	For filing a request for <i>ex parte</i> reexamination	
112	212	920*	920*	Requesting publication of SIR prior to Examiner action	
113	213	1,840*	1,840*	Requesting publication of SIR after Examiner action	
115	215	110	55	Extension for reply within first month	
116	216	390	195	Extension for reply within second month	
117	217	890	445	Extension for reply within third month	
118	218	1,390	695	Extension for reply within fourth month	
128	228	1,890	945	Extension for reply within fifth month	
119	219	310	155	Notice of Appeal	
120	220	310	155	Filing a brief in support of an appeal	
121	221	270	135	Request for oral hearing	
138	238	1,510	1,510	Petition to institute a public use proceeding	
140	240	110	55	Petition to revive - unavoidable	
141	241	1,240	620	Petition to revive - unintentional	
142	242	1,240	620	Utility issue fee (or reissue)	
143	243	440	220	Design issue fee	
144	244	600	300	Plant issue fee	
122	222	130	130	Petitions to the Commissioner	
123	223	50	50	Petitions related to provisional applications	
126	226	180	180	Submission of Information Disclosure Stmt	
581	581	40	40	Recording each patent assignment per property (times number of properties)	40.00
146	246	710	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	249	710	355	For each additional invention to be examined (37 CFR § 1.29(b))	
179	249	710	355	Request for Continued Examination (RCE)	
169	269	900	900	Request for expedited examination of a design application	
Other fee (specify)					

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (S) 300.00

SUBMITTED BY

Name (Print/Type) Eric J. Robinson

Registration No. (Attorney/Agent) 38,285

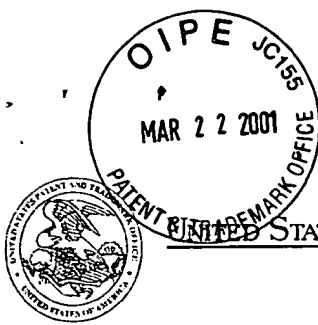
Telephone (703) 790-9110

Signature

Date 3/15/01

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 #3

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/708,085	11/08/2000	Nobuhiro Jiwari	0819-450

 22204
 NIXON PEABODY, LLP
 8180 GREENSBORO DRIVE
 SUITE 800
 MCLEAN, VA 22102

FORMALITIES LETTER



OC000000005684013

Date Mailed: 01/17/2001

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.
Applicant must submit \$ 710 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).
- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The application was filed in a language other than English.
- Applicant must file an English translation of the application, the \$ 130 fee set forth in 37 CFR 1.17(k), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).
- Because your specification was filed in a language other than English, the Office was unable to determine the number of claims submitted. Additional claim fees may be due once the number of claims can be determined.

03/23/2001 AWONDAF1 00000002 09708085

- The balance due by applicant is \$ 970.

01 FC:101	710.00 OP
02 FC:105	130.00 OP
03 FC:139	130.00 OP

*A copy of this notice **MUST** be returned with the reply.*

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